

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

*07 MAP 21 10 05



Strait and Commission

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	(Type of Fill	it Oldariy/	
PARTI LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
ARTATES	PERRY	0.	(808)845-6221
MAILING ADDRESS (Street)			FAX
1432 Middle Street			(808)847-8048
(City)	(State)	(Zip Code)	
Honolulu	HI		96819
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Hawaii Operating Engineers Industry Stabilization Fund			(808)845-6221
MAILING ADDRESS (Street)			FAX
1432 Middle Street			(808)847-8048
(City)	(State)	(Zi	p Code)
Honolulu	HI		96819

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE			
Hawaii Operating En	(808) 845-6221				
MAILING ADDRESS (Street)	FAX				
1432 Middle Street	(808)847-8048				
(City)	(State)	(Zip Code)			
		:			
Honolulu	HI	96819			
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE			
John Sweeney		(510)433-4422			
MAILING ADDRESS (Street)		FAX			
1640 South Loop Road		(510) 337–3060			
(City)	(State)	(Zip Code)			
Alameda	CA	94502			

PART III DESCRIPTION	OF SUBJECTS UPON WHICH	YOU EXPECT TO LOBBY			
Agriculture	Education	Human Services	Science, Technology & Economic Developmen		
Communications & Public Utilities	Government Operations & Finance	✓Intergovernmental Relations, International Affairs	✓ Tourism & Recreation		
Consumer Protection & Commerce	✓Hawaiian Affairs	Labor & Employment	Transportation		
Culture, Arts, Historic Preservation Ecology, Energy Environmental Protection	Health	Planning, Land & Water Use Management Public Safety & Corrections	Construction related subjection		
Environmental i rotoction					
	N OF LOBBYIST				
I hereby certify that the	information furnished above is,	to the best of my knowledge,	correct and complete.		
797		3-1	16-07		
(Signature of Lobbyist)			(Date)		
PART V AUTHORIZATION	N TO LOBBY				
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
PERRY O. ARTATES		EVECUTUE DIBECTOR			
TERRY OF ARTAIES		EXECUTIVE DIRECTOR			
NAME OF ORGANIZATION (if applicable)			ELEPHONE		
HAWAII OPERATING ENGINEERS INDUSTRY STABILIZATION FUND			(808)845-6221		
MAILING ADDRESS (Street)			X		
1432 MIDDLE STREET			(808)847-8048		
(City)	(State)	(State) (Zip Code)			
HONOLULU	HI	96819			
I hereby authorize the a	above - named person to engag	e in lobbying activities on beh	alf of the undersigned.		
- 0	\	0.1			

(Signature of Authorizing Officer or Person Represented)

(Date)